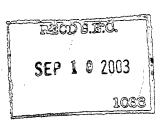
FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 29549

FORM D FER

Expires: May 31, 2002 Estimated average burden Hours per response

OMB Number:

3235-0076

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OK UNIFORM LIMITED OFFERING EXEMPTION

SEC US	SE ONLY
Prefix	Serial
1	
DATE REC	CEIVED
1	1

OMB Approval

Series F Preferred Stock Series F Preferred Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	03043786
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) INFONXX, Inc.	03073760
Address of Executive Offices (Number and Street, City, State, Zip Code 3864 Courtney Street, Suite 411, Bethlehem, PA 18017	Telephone Number (Including Area Code) (610) 997-1000
Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business The Company provides directory assistance services to telephone companies and other businesses. Type of Business Organization Corporation Imited partnership, already formed business trust limited partnership, to be formed	other (please specify):
Actual or Estimated Date of Incorporation or Organization: June 1992 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State; CN for Canada; FN for other foreign jurisdiction) DE	Actual Estimated PROCESSED
GENERAL INSTRUCTIONS Federal:	SEP 12 2003
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 77d(6).	Section 4(6), 17 chia recul et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, it due, on the date it was mailed by United States registered or certified mail to that address.	

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-97)

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				· · · · · · · · · · · · · · · · · · ·
Pines, Robert A.					
Business or Residence Addre			, Zip Code)		
3864 Courtney Street, Suite 41.		8017			
Check Box(es) that Apply:	Promoter	⊠ Beneficial	Executive Officer	□ Director	General and/or
		Owner			Managing Partner
Full Name (Last name first, i	f individual)				
Tisch, Thomas A.					
Business or Residence Addre			, Zip Code)		
667 Madison Avenue, 7th Floor	, New York, NY 10				
Check Box(es) that Apply:	Promoter	Beneficial	Executive Officer	Director	General and/or
		Owner			Managing Partner
Full Name (Last name first, i	f individual)				
White, Michael H.					
Business or Residence Addre	ess (Number and	Street, City, State	, Zip Code)		
c/o Rite-Hite Corporation, 89	000 North Arbon	Drive, PO Box 23	8043, Milwaukee, WI 532	23	
Check Box(es) that Apply:	Promoter		Executive Officer	Director	General and/or
		Owner			Managing Partner
Full Name (Last name first, i	f individual)		·		
Steinberg, Thomas					
Business or Residence Addre	ss (Number and	Street, City, State	Zip Code)	·	
667 Madison Avenue, 7th Floor,			; —.F		
Check Box(es) that Apply:	Promoter -		Executive Officer	□ Director	General and/or
7 · · · · · · · · · · · · · · · · · · ·		Owner			Managing Partner
Full Name (Last name first, i	f individual)				
Marwell, Evan C.	,,				
Business or Residence Addre	ess (Number and	Street City State	Zip Code)		
23 West 12th Street, New Yo		51,051, 6.1, Guide	, ,		
Check Box(es) that Apply:	Promoter	☐ Beneficial	Executive Officer	Director	General and/or
Check Box(os) that Appril.	☐ 1.0o.c.	Owner	M Europativo Ottiber	_ Director	Managing Partner
Full Name (Last name first, i	f individual)	<u> </u>			
Hargrove, Michael	i marriduar)				
Business or Residence Addre	see (Number and	Street City State	Zin Code)		
3864 Courtney Street, Suite			, zip code)		
Check Box(es) that Apply:	Promoter	Beneficial	Executive Officer	Director	General and/or
Check Box(es) that Appry:	Fromoter	Owner	M Executive Ourcer	☐ Director	
E-h M / C	f to atot docats	Owner		- 	Managing Partner
Full Name (Last name first, i	i muividual)				
DeNardo, Scott E.	(N - 1	Street City Street	7:- Co.do)		
Business or Residence Addre			, Zip Code)		•
3864 Courtney Street, Suite	111, Bethlehem,	PA 1801/			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or
					Managing Partner
Full Name (Last name first,	if individual)			 	
Freedman, David					
Business or Residence Addr	and (Number and	Street City State 7in Co			
	•		ue)		
3864 Courtney Street, Suite					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or
					Managing Partner
Full Name (Last name first,	if individual)				
Marwell INFONXX, Inc.					
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	ide)		
2740 Divisadero Street, San		• • • • • • • • • • • • • • • • • • • •	,		•
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
check box(es) that Apply.	I Tomoter	Beneficial Owner	Executive Officer	Director	
77 11 27	1001 31 13 35				Managing Partner
Full Name (Last name first,	it individual)				
Pines INFONXX, Inc.					· ·
Business or Residence Addr	ess (Number and !	Street, City, State, Zip Co	de)		
136 E. 79th Street, PH 15-A,	New York, NY 1	10021		_1	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
, , , , , ,			_		Managing Partner
Full Name (Last name first,	if individual)	· · · · · · · · · · · · · · · · · · ·			9 8
Tan ivaine (East name 1751,	ii mairidaai)				
Business and Busidess Adda	(Niverboy and I	Stand City State Tin Co	40)		
Business or Residence Addr	ass (mullibel and	street, City, State, Zip Co	ide)		
					
Check Box(es) that Apply:,	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or
		-			Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	de)		
	•		•		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
Check Box(cs) that rippiy.	rromoter	Beneticial Owner			Managing Partner
Eull Name (Last some first	if individual)	, , , , , , , , , , , , , , , , , , ,			Managing Lattici
Full Name (Last name first,	n maividuai)				
			 		
Business or Residence Addr	ess (Number and)	Street, City, State, Zip Co	ide)		

:				В.	INFO	RMAT	ION A	BOUT	OFFER	RING				
													Yes	No
1. Has	the issue	r sold or	does the	issuer int	end to se	ll, to non	-accredit	ed invest	ors in this	offering	;?		П	\boxtimes
					ver also ii					_				_
2. Wha	it is the m	ninimum	investme		ill be acc	* -			_				\$	3,000
2			mvoonne		00 400	оргош по		or roun.			•••••		Yes	No
3. Doe:	s the offe	ring perr	nit joint o	ownershi	p of a sin	gle unit?	***********			•••••			X	
4. Enter any the SE list dear	er the information commission offering C and/or ed are as the conty.	formation ssion or s . If a pe- with a s ssociated	requeste imilar re- rson to be tate or st	ed for eac muneration e listed is tates, list of such a	ch person on for sol s an assoc the name broker o	who has icitation ciated per e of the l	s been or of purcharson or agoroker or	will be passers in congent of a dealer.	paid or gi onnection broker on If more t	ven, dire with saled re dealer re han five	ectly or in les of sec- egistered (5) perso	directly, urities in with the		
Busines	s or Resi	dence A	ddress (N	umber a	nd Street,	City, Sta	ate, Zip C	ode)						
Name o	f Associa	ated Brol	ker or De	aler										
(Check	"All Sta	ites" or	check in	dividual	ited or In States)		***********		***********				. [] Al	ll States
[AL] [IL]	[AK] (IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	{WA}	[WV]	[WI]	[WY]	[PR]		
Full Na	me (Last	name fir	st, if indi	vidual)										
Busines	s or Resi	idence A	ddress (N	lumber a	nd Street,	City, Sta	ate, Zip C	Code)						
Name o	f Associa	ated Brol	ker or De	aler				· · · ·						
States i	n Which	Person	Listed H	las Solici	ited or In	tends to	Solicit F	urchase	rs					
-					States)								. 🔲 Al	l States
[AL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	(NM)	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[GZ]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Na	me (Last	name fir	st, if indi	vidual)										
Busines	s or Resi	idence A	ddress (N	lumber ai	nd Street,	City, Sta	ate, Zip C	ode)				-		
Name o	f Associa	ated Brok	ker or De	aler										
					ted or In States)			urchase	rs					I States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	· :*'	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W1]	{WY}	[PR]		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate	Amount
		Offering Price	Already Sold
	Debt	\$0	\$ <u>0</u>
	Equity	\$ <u>10,001,995</u>	\$ <u>9,509,003</u>
	☐ Common ☒ Preferred		
	Convertible Securities (including warrants)	so	\$ <u>0</u>
	Partnership Interests	S0	\$0
	Other (Specify)	\$ <u>0</u>	\$0
	Total	\$ <u>10,001,995</u>	\$ <u>9,509,003</u>
	Answer also in Appendix, Column 3, if filing under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount Of Purchases
	Accredited Investors	36	\$9,509,003
	Non-accredited Investors	0	\$0
	Total (for filings under rule 504 only)	0	\$ 0
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering	Type of	Dollar Amount
		Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.a	Exercises a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an		
	expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees		\$ 0
		片	\$ <u>0</u> \$ 0
	Printing and Engraving Costs	Ħ	\$100,000
	Legal Fees		\$ 100,000
		片	\$ 0
	Engineering Fees	片	\$ 0
		님	\$ 0
	Other Expenses (identify) Total	₩	\$0
	1 U(a)		Ψ <u>100,000</u>

	C. OFFERING PRICE, NUM	IBER OF INVESTORS, EXPENSES	AND	USE O	F PRO	CEE	DS
b.	Question 1 and total expenses furnis	regate offering price given in response to Par hed in response to Part C – Question 4.a. ds to the issuer."	This			\$	9,409,003
5.	be used for each of the purposes shown an estimate and check the box to the I	sted gross proceeds to the issuer used or propose. If the amount for any purpose is not known, fueft of the estimate. The total of the payments ds to the issuer set forth in response to Par	urnish listed				
				Payme Offic Direct Affili	ers, ors &	Pa	syments to Others
	Salaries and fees		🔲	\$	0 🖂	\$	0
	Purchase of real estate			\$			0
	Purchase, rental or leasing and installati	on of machinery and equipment	🔲	\$			0
	Construction or leasing of plant building	gs and facilities	🔲	\$			0
	offering that may be used in exchange f	ng the value of securities involved in this or the assets or securities of another issuer		\$	0 🗆	\$	0
	Repayment of indebtedness		\Box	\$		<u></u>	
	• •			\$\$		\$	<u>0</u> 9,409,0 <u>0</u> 3
	Other					-	_21, 102,1032
			_				
				\$	0 П	¢	0
	Column Totals		□	\$		\$ \$	9,409,003
	Total Payments Listed (column totals a	lded)			\boxtimes	\$_	9,409,003
	·				:		✓
_							
		D EEDEDAL GLOVATURE					
The	issuer has duly coured this nation to he	D. FEDERAL SIGNATURE signed by the undersigned duly authorized person	TE th	is notice is	filed up	don D	ula 505 tha
foll	owing signature constitutes an undertaking	by the issuer to furnish to the U.S. Securities and sucre to anymon-accredited investor pursuant to par	Exchan	ge Commi	ssion, up	on wr	itten request
	uer (Print or Type)	,,	Date				
IN	FONXX, Inc.		Septem	ber 9 , 20	03		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)					
Da	vid Freedman	Executive Vice President					
-							
		ATTENTION					

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

		E. STATE SIGNA	TURE		
1.	Is any party described in 17 CFR 230 the disqualification provisions of suc			Yes	No ⊠
		See Appendix, Column 5, for	state response.		
2.	The undersigned issuer hereby undert Form D (17 CFR 239.500) at such time		strator of any state	e in which this notice	is filed, a notice on
3.	The undersigned issuer hereby undert issuer to offerees.	akes to furnish to the state admini	strators, upon writ	ten request, informati	on furnished by the
4.	The undersigned issuer represents tha Limited Offering Exemption (ULOE availability of this exemption has the	E) of the state in which this not	ce is filed and u	nderstands that the	
	ne issuer has read this notification and k dersigned duly authorized person.	nows the contents to be true and h	as duly caused this	s notice to be signed o	on its behalf by the
Iss	suer (Print or Type)	Signature	Di	ate	
IN	FONXX, Inc.		Se	eptember 9, 2003	
Na	ame of Signer (Print or Type)	Title of Signer (Print or Type)	l	•	
Da	avid Freedman	Executive Vice President		. en	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APP	ENDIX				
1	Intend Non-ac Inves	to Sell to credited tors in ate	Type of security And aggregate Offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				ification State (if yes, ach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No
AL									·
AK									
AZ									
AR									
CA		X	Preferred Stock, Series F	1	\$7,000.56				
СО									
СТ									
DE		Х	Preferred Stock, Series F	1	\$2,010,998.83				
DC		Х	Preferred Stock, Series F	1	\$48,999.29				
FL									
GA									
HI							:		
ID									
IL									
IN									
IA									
KS									
KY	ļ			<u> </u>					
LA									
ME	ļ		<u> </u>						
MD	 								
MA		Х	Preferred Stock, Series F	4	\$115,997.30				
MI									
MN	ļ								
MS				1					

				APP	ENDIX				5
	Intend Non-ac Inves	to Sell to credited tors in ate -Item 1)	Type of security And aggregate Offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2) Number of Number of				
State	Yes	No		Accredited Investors	Accredited Nonaccredited			Yes	No_
МО									
MT									
NE									
NV									
NH				<u> </u>					
NJ		Х	Preferred Stock, Series F	4	\$133,001.38				
NM									
NY		х	Preferred Stock, Series F	15	\$6,397,002.46				
NC									
ND	ļ								
ОН			! !						
OK.	ļ								
OR'		X	Preferred Stock, Series F	1	\$21,001.68				
PA									
RI									
sc	<u> </u>								
SD								ļ	ļ
TN									
TX			·						
UT	 			<u> </u>					ļ
VT	-								
VA									
WA	-		· · · · · · · · · · · · · · · · · · ·						
WV									
WI		X	Preferred Stock, Series F	9	\$775,001.81				

				APPE	ENDIX					
1		2	3			4			5	
	Non-ac Inves St	to Sell to credited tors in ate -Item 1)	Type of security And aggregate Offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (if yes, Attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No No	(Fart C-Rein I)	Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No No	
WY				<u> </u>						
PR					·····					